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PTO/SB/21 (07-09)

Approved for use through 07/31/2012. OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 5

Application Number	10/540,629-Conf. #5380
Filing Date	June 23, 2005
First Named Inventor	Yuichi Tokita
Art Unit	1795
Examiner Name	R. G. McDonald
Attorney Docket Number	S1459.70075US00

ENCLOSURES (Check all that apply)

- | | | |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | Japanese Office Action Issued August 4, 2009 |
| <input checked="" type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) _____ | Japanese Office Action Issued August 4, 2009 |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Landscape Table on CD | Copies of Cited References Return Receipt Postcard |
| <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application | Remarks | |
| <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	WOLF, GREENFIELD & SACKS, P.C.		
Signature			
Printed name	Randy J. Pritzker		
Date	9-25-09	Reg. No.	35,986

Certificate of Mailing Under 37 CFR 1.8(a)

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Dated: 9-25-09

Signature: (MacAulay S. Rush)



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	Art Unit	1795	
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Total Number of Pages in This Submission	5	Attorney Docket Number	S1459.70075US00

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Remarks		

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Firm Name	WOLF, GREENFIELD & SACKS, P.C.		
Signature			
Printed name	Randy J. Pritzker		
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PTO/SB/17 (10-08)
Approved for use through 06/30/2010. OMB 0651-0032
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Effective on 12/08/2004. Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2009		Complete if Known	
		Application Number	10/540,629-Conf. #5380
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	June 23, 2005
TOTAL AMOUNT OF PAYMENT (\$) 180.00		First Named Inventor	Yuichi Tokita
		Examiner Name	R. G. McDonald
		Art Unit	1795
		Attorney Docket No.	S1459.70075US00

METHOD OF PAYMENT (check all that apply)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____
<input type="checkbox"/> Deposit Account	Deposit Account Number: <u>23/2825</u> Deposit Account Name: <u>Wolf, Greenfield & Sacks, P.C.</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	
							Small Entity Fee (\$)
2. EXCESS CLAIM FEES							Fee (\$)
Fee Description							Small Entity Fee (\$)
Each claim over 20 (including Reissues)							52
Each independent claim over 3 (including Reissues)							220
Multiple dependent claims							390
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
10 - 40 or HP		x	=		Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
2 - 6 or HP		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
- 100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S)							Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement							180.00

SUBMITTED BY			
Signature	<u>Randy J. Pritzker</u>	Registration No. (Attorney/Agent)	35,986
Name (Print/Type)	Randy J. Pritzker	Telephone	617.646.8000
		Date	9-25-09

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Dated: <u>9-25-09</u>	Signature: <u>[Signature]</u> (MacAulay S. Rush)



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		Application Number	10/540,629-Conf. #5380	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	June 23, 2005	
		First Named Inventor	Yuichi Tokita	
		Examiner Name	R. G. McDonald	
		Art Unit	1795	
TOTAL AMOUNT OF PAYMENT	(\$)	180.00	Attorney Docket No.	S1459.70075US00

METHOD OF PAYMENT (check all that apply)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account	Deposit Account Number: 23/2825
Deposit Account Name: Wolf, Greenfield & Sacks, P.C.	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
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<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description						Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						52	26
Each independent claim over 3 (including Reissues)						220	110
Multiple dependent claims						390	195
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
10 - 40 or HP		x	=		Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
2 - 6 or HP		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
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Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
- 100 =		/50 =	(round up to a whole number) x		=		
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Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement						180.00	

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Signature	<i>Randy J. Pritzker</i>	Registration No. (Attorney/Agent)	35,986
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Dated: 9-25-09	Signature: <i>MacAulay S. Rush</i> (MacAulay S. Rush)